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EDITORIAL COMMENT

PLACE OF THE YOUNG GRADUATE

As we glance over the notices of the commencement exercises recorded in our pages at this season of the year, and note the long lists of names of young women who are ready to take their places in the nursing world, the question sometimes arises, What are they all going to do? Where is there room for them?

Of one thing we may be sure, that the old saying, "There is always room at the top," holds true in the nursing profession as well as everywhere else. If all these young nurses are entering the field of action filled with the highest ideals, full of zeal for the public welfare, eager to be of service to suffering humanity, there cannot be too many of them. Never has there been a time or place in which there were too many good, earnest, unselfish nurses, though there are often sections that are overcrowded with the self-seeking and mercenary.

It is interesting to note how the demands for special lines of nursing service change as the years go by, and how each set of recruits finds its own special field awaiting it. In the beginning of training-school days, the nurses who graduated were pioneers, sent out to break paths for the rest of us both in hospitals and in homes, and how well they did it we sometimes forget to consider. Then, as schools increased, there came growing demands for superintendents, almost more than could be filled. Private duty always has and always will demand the services of a great portion of our graduates, but the fields that seem now in special prominence and specially in need of workers are those connected with the various forms of social service. Work for the insane, for the tubercular, for school children, for convalescents discharged from hospitals, for those who visit dispensaries, for the poor in their homes, all these are calling for specially trained workers and fortunately our schools are rising to meet the demands and are sending out nurses who have special opportunities along some of these lines.

Our longer period of training, our better teaching, our improved opportunities of seeing many sides of philanthropic as well as nursing work, all demand a higher and finer service from those privileged to enjoy such opportunities. Higher education brings with it increased obligations. All these improvements are not for our own selfish use but are to fit us to be better instruments for the use of humanity.

One call which should meet with a ready response from every right-minded young worker is that to the Red Cross service. How triumphant we should feel if every name of every graduate were at once enrolled on the reserve list, and there is no reason why the names should not be there. In time of war or calamity only those who are at the time free from professional duties are expected to respond, but for just that reason there must be a long list to choose from. The Red Cross nurses are also the army reserve corps and stand back of the regular army nursing service just as the militia stand back of the army. Although all nurses are welcome to enlist, the appeal is made especially to the young and vigorous, those who would be able in an emergency to put up with irregular food and sleep, long hours of travel, and work under unusual conditions. Every true nurse would be glad to meet such conditions but those older in the fray might prove physically unequal to the demand.

In welcoming the new graduates to our ranks, let us hope that they will bring fresh courage and new ideas while we, in turn, share the results of our experience with them.

NURSING IN MISSION STATIONS

Two years ago, a department was started under this heading with the hope that it might prove a means of communication between the many nurses of many creeds who are scattered over the face of the earth, whose aim in life is the same,—to bring the knowledge of healthful methods of living to those who are deep in superstition and ignorance. The result has exceeded our expectations, and our only difficulty has been to choose from the material sent us that which should come first. Just at present the Visiting Nurse and Mission Stations departments are being alternated because of lack of available space in the Journal.

Some one asked us recently just what the work of a missionary nurse is. That would be hard to say. She is always the physician's assistant in his hospital and dispensary work. She is usually both matron and superintendent of the hospital as well, and possibly she will have a band of native women to train, teaching them, it may be, reading and writing, in addition to nursing. She may find text-books already translated for her use. She may find nothing prepared and may make her own text-books from old ones of her own, or from articles in nursing magazines, translating enough for a lesson at a time. She must always, of course,

master the language of the country in which she works, and if she possesses any accomplishments, either useful or ornamental,—such as cooking, sewing, singing, playing the organ,—she may be sure they will be needed. Reports come to us of nurses who have planned new buildings, overseeing the work themselves; of others who have planned systems of sewerage, drainage, etc. Any one who is weary of the ordinary routine of civilization will find her powers taxed in new ways on the mission field, but no one should attempt missionary nursing who is not prepared to put up with many personal discomforts and to cling to her faith in humanity in the face of dirt and degradation.

Already nursing associations are being formed in different countries where, a short time ago, trained nurses were unknown. In China there is a movement toward organization, a call having been sent out by Dr. Cousland of Shanghai, and the editor of the China Medical Journal has offered space in his magazine for a nursing department. A great deal of the higher educational work in China is on the interdenominational plan, and it is to be hoped that the nursing societies will organize in the same way.

In Nanking, China, a Union Nurses' Training School has been established and has graduated its first class.

In India the recently formed Association of Nursing Superintendents, while not a missionary organization, includes missionary nurses in its membership.

In England the Nurses' Missionary League has a membership of 942, of whom 294 are volunteers—those who expect to do missionary nursing. The League supports five beds in mission hospitals and a native nurse in India.

Various new branches of medical and philanthropic work are opening, such as the school in Pau-ting-foo, China, for deaf and dumb, and the Light Giving School for Blind Girls in Canton. In a country where the proportion of blind is so great, this seems to be the only place of instruction for those so afflicted. The natural fate of a blind girl there is to be sold into a life of shame. Dr. Mary Niles, who has carried on this school from the beginning, undertook it because she was so moved by the pitiable condition of her blind patients. She teaches these girls to read and write by the Braille system and they also learn to sew, to knit, to do housework, to sing, and to play. The graduates have proved most valuable as Bible women and teachers. If China, in its awakening, establishes blind schools of its own these women will be in demand as teachers. There is as yet no provision for teaching blind boys.

There are many dark places in our own land as is shown by two communications in our letter department in this Journal. When a nurse

finds ignorance and filth in the home to which she is called, the spirit with which she enters the house will make or mar her usefulness. If she is critical in her attitude, feeling superior to those about her, and keeping her thoughts chiefly on her own comfort, she will do very little good either as a woman or a nurse. If she can adapt herself to her environment and bring order out of chaos without demanding the impossible or making others uncomfortable by her disdain, she is a true missionary.

Such conditions in our own land may be described as islands of darkness in a sea of light, while the mission stations in foreign lands may be called islands of light in a sea of darkness. We cannot realize the cruelties inflicted on women and little children where superstition and ignorance take the place of medical science.

A quotation from Miss Bender, of Shanghai, shows what problems confront our missionary nurses: "Not until we have good capable nurses in our mission hospitals will the hospital amount to very much, and unless we nurses undertake the responsibility of training the native women as nurses they will never be trained. Taking in a few coolies or unqualified women and trying to make them answer is not the best that we can do."

FLIES AS CARRIERS OF DISEASE

THE New York Education Department in Bulletin 129 has issued a pamphlet on "The Control of Household Insects," by Ephraim Porter Felt, D.Sc., from which we have taken the following facts about the common house-fly:

Flies have been proven to be the carriers on their hairy legs and in their bodies of the bacilli of typhoid, cholera, tuberculosis, and certain forms of diarrhœa. Under certain conditions they may aid in spreading smallpox, plague, trichoma, septicæmia, erysipelas, and leprosy, and play an important part in the mortality of bottle-fed babies. They breed by preference in horse manure, to a limited extent in cow manure and in miscellaneous filth. One fly may deposit one hundred and twenty eggs; the young maggots hatch in less than twenty-four hours, completing their growth in from five to seven days. The life circle is complete in from ten to fourteen days and there may be ten or twelve generations in a season. Twelve hundred flies may be bred from one pound of manure. Fly specks have been found to contain the bacilli of cholera. Flies usually breed within from three to five hundred feet of the place where they are abundant. They do not breed in the dark.

Garbage and refuse receptacles should be tight and closely covered. Manure pits should be screened and emptied at least once a week, or the manure kept in dark closely covered concrete pits. The old fashioned privy box should be abolished when possible. It may be screened and used as an earth closet. We have seen this easily done by using the ashes from the kitchen stove in sufficient quantity to keep the pit dry and the contents covered; this also controls the odor that makes so many country yards offensive.

In the crusade against the common house-fly nurses will play an important part—preaching the gospel of screens and cleanliness, showing the ignorant and careless how to clean up the breeding places if near at hand, and how to protect the food, the baby, and the house from the invasion of those disease-carrying little legs and bodies.

That terrible little boy whose evil nature was early manifested by a persistent determination to catch flies and pull out their legs and wings can no longer be held up to the children of the future as an example of cruelty and wickedness. He has been wiser than his generation, that is all, guided by an inherent instinct of self-preservation.

CENTRAL REGISTRIES

In this number we have given a little paper read at the tenth anniversary of the Boston Nurses' Club which furnishes a history of the origin and development of one of the first central registries managed by a nursing organization. Previous to the establishment of the Boston Nurses' Club the registry in Boston had been conducted on lines similar to those of Philadelphia, under the auspices of a medical library. When the nurses broke away from the dominance of the medical society and established a registry of their own, it was considered to be a step of very grave responsibility, with the chances of failure seeming to be great.

The success of the Boston Nurses' Club and its directory should give assurance and courage to the nurses in all of the great centres who are hesitating to establish a central registry of their own.

One of the notable events of the year has been the organization, on the basis of a stock company, of a central registry in Baltimore under the auspices of the Maryland State Association. Previous to that we have had successful central directories in Washington, Cleveland, and other smaller places, which have been notably successful; in fact we have yet to hear of the failure of any that has been established by nurses.

We believe the establishment of central directories to be a necessity, more especially in those states that now have laws in operation for state registration, that there may be a place to which the people naturally turn in order to secure registered nurses.

THE TUBERCULOSIS SCHOLARSHIP

It may not be perfectly clear to everyone that the tuberculosis scholarship is open to nurses of the whole country. The chairman of the committee having the work in charge is Miss Goodrich, of Bellevue

and Allied Hospitals, with Miss McKechnie, of Nassau Hospital, as secretary, and an outline found in the official announcements gives further details of how to make application. We wish again to recall to our readers that this fund is the surplus of money contributed for a nurses' exhibit at the Tuberculosis Congress in Washington last year, left after all claims had been met.

PROGRESS OF STATE REGISTRATION

We hear that the Pennsylvania bill has been signed by the Governor, but we have not received any official announcement or a copy of the bill for publication.

We publish in this issue the bill passed by the Missouri state legislature which became a law on May 5. While on first reading there seem to be some questionable conditions in the Missouri bill, the fact that they are undefined and capable of varying interpretation may be construed as giving breadth for greater development than seems apparent.

As we close our pages a telegram reaches us with the news that the Michigan bill has passed the senate.

THE CONVENTIONS

As this number of the Journal goes to press, a number of the faraway members of the national societies will already have begun to journey toward Minneapolis. The Minnesota nurses have been such faithful supporters of our national work and have been so anxious to have us meet with them that we hope they may have in their midst one of the very best of our conventions, and certainly it is an unusual honor to have all three at once, the Superintendents, the Federation, and the Associated Alumnæ. The Journal extends greetings for profitable meetings and happy reunions of old friends.

MISS MCISAAC'S WITHDRAWAL

The associations affiliated with the Associated Alumnæ have learned through the secretary of the withdrawal of Miss McIsaac's name as candidate for the presidency. This news has been received with regret in every part of the country as she was the unanimous choice of the affiliated societies. At the Minneapolis meeting nominations for the presidency will have to be made from the floor.

Miss McIsaac's reasons for withdrawing could not have been foreseen; they were entirely personal and arose most unexpectedly at the eleventh hour. She received an offer to engage in remunerative literary work which she must avail herself of and which would leave her neither time nor strength for other demands.